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**\*BIBDATASHEET\***

Bib Data Sheet

**CONFIRMATION NO. 1522**

SERIAL NUMBER 10/027,929	FILING DATE 12/20/2001  RULE	CLASS 426	GROUP ART UNIT 1744	ATTORNEY DOCKET NO. CRSL118421
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## APPLICANTS

Anthony J.M. Garwood, Mercer Island, WA;

**\*\* CONTINUING DATA \*\*\*\*\***

*Y*  
 This application is a CIP of PCT/US01/45146 11/28/2001  
 which claims benefit of 60/255,684 12/13/2000  
 and claims benefit of 60/286,688 04/26/2001  
 and claims benefit of 60/291,872 05/17/2001  
 and claims benefit of 60/299,240 06/18/2001  
 and claims benefit of 60/312,176 08/13/2001  
 and claims benefit of 60/314,109 08/21/2001  
 and claims benefit of 60/323,629 09/19/2001  
 and claims benefit of 60/335,760 10/19/2001  
 This application 10/027,929  
 is a CIP of 09/724,287 11/28/2000  
 which is a CIP of PCT/US00/29038 10/19/2000  
 which is a CIP of 09/550,399 04/14/2000 ABN  
 which claims benefit of 60/129,595 04/15/1999  
 and claims benefit of 60/141,569 06/29/1999  
 and claims benefit of 60/144,400 07/16/1999  
 and claims benefit of 60/148,227 07/27/1999  
 and claims benefit of 60/149,938 08/19/1999  
 and claims benefit of 60/152,677 09/07/1999  
 and claims benefit of 60/154,068 09/14/1999  
 and claims benefit of 60/160,445 10/19/1999  
 and claims benefit of 60/175,372 01/10/2000  
 and is a CIP of 09/392,074 09/08/1999 ABN  
 which is a CON of 09/039,150 03/13/1998 ABN  
 which claims benefit of 60/040,556 03/13/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

*None*  
 IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 02/15/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING 6	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
ADDRESS 26389 CHRISTENSEN, O'CONNOR, JOHNSON, KINDNESS, PLLC 1420 FIFTH AVENUE SUITE 2800 SEATTLE , WA 98101-2347					
TITLE Method and apparatus for sanitizing perishable goods in enclosed conduits					
FILING FEE  RECEIVED 495	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	